

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW			
RESPONSE FORMALITY REVIEW	LD		10-24-00

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral) ... Canceled A Appeal
 + Restricted O Objected

Claim	Date	Claim	Date	Claim	Date
Final	Original	Final	Original	Final	Original
1	2	51		101	
2	3	52		102	
3	4	53		103	
4	5	54		104	
5	6	55		105	
6	7	56		106	
7	8	57		107	
8	9	58		108	
9	10	59		109	
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27	28	77		127	
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31	32	81		131	
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41	42	91		141	
42	43	92		142	
43	44	93		143	
44	45	94		144	
45	46	95		145	
46	47	96		146	
47	48	97		147	
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If more than 150 claims or 10 actions
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PLICATION NO.
 09/601339

Roger Saw

Measurement

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